



CITY OF DUMAS

P.O. BOX 438
DUMAS, TEXAS 79029

(806) 935-4101



MIKE MILLIGAN
MAYOR

VINCE DiPIAZZA
CITY MANAGER

CREDIT CARD AUTHORIZATION

I request and authorize the City of Dumas to apply Building Permit charges to the following credit card upon receipt of fax transmitted request for permit.

Contractors Name _____

Address _____

City, State, Zip _____

Credit Card Type _____ Card # _____

Expiration Date _____

Authorized Signature _____

PERMIT INFORMATION:

Owners Name _____ Address _____

Estimated Cost of Job \$ _____ Type of Roof _____ # of Squares _____

Contractor Lic. ☐ Sprinkler System ☐ HVAC ☐ Plumbing ☐ Electrical ☐

Use of this information will be for the issuance of building permits only by an authorized employee of the City of Dumas Engineering Department.

Copy of Permits and receipts will be mailed to the above address upon completion of permits.